

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITIVE INITIALS ID NO. DATE
 FEE DETERMINATION
 O.I.P.E. CLASSIFIER
 FORMALITY REVIEW 7M 59 5864 1161
 RESPONSE FORMALITY REVIEW 1124/01

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)..... Canceled A Appeal
 ÷ Restricted O Objected

Claim	Date
Final Original	
1	✓
2	✓
3	✓
4	✓
5	✓
6	✓
7	✓
8	0
9	✓
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Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions
staple additional sheet here

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